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≔ γ	JTILITY	Attor	ney Docket No.			
PATENT	APPLICATION	First .	Inventor	Z	he Li	
TRA	NSMITTAL	Title	Method For Locating Functional Mistakes In Digital Circuit Designs			stakes
(Only for new nonprovision	nal applications under 37 CFR 1.53(b) Expre	Express Mail Label No. ET039505937US)37US
	TION ELEMENTS erning utility patent application conte		DRESS TO:	Assistant Cor Box Patent A Washington,	pplication	
Fee Transmittal Fe	orm (e.g., PTO/SB/17)	7.	CD-ROM or C			· · · · · · · · · · · · · · · · · · ·
1. A (Submit on original and a Applicant claims s	duptimas for fee processing) mall entity status.	Q N		gram (<i>Append</i> i	x)	d
See 37 CFR 1.27.			if applicable, all nece	essary)		Jinession .,
3. X Specification (preferred arrangement) - Descriptive title	t set forth below)	a.	٠ '	eadable Form (•	
- Cross Reference	e to Related Applications	b	Specification Sequ	•		
1	arding Fed sponsored R & D quence listing, a table,		. —	ROM or CD-R (2 -	copies)); or
or a computer p - Background of	rogram listing appendix	c	ii. ∐ paper	verifying identit	v of abou	ve copies
- Brief Summary		F	ACCOMPANY		_	
- Detailed Descri		9		apers (cover s		
- Claim(s) - Abstract of the	37 CER 3 73(h) Statement Power of					
4. X Drawing(s) (35 U	S.C. 113) [Total Sheets 5] 11		station Docume	ent (if ap	,
5. Oath or Declaration	[Total Pages 2]] 12	. Information D	Xisclosure DS)/PTO-1449	Ш	Copies of IDS Citations
a. X Newty execu	ited (original or copy)	13		•		
b. Copy from a	b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)			3)		
	I. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			(s)		
named in t 1.63(d)(2)	named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Request and Certification under 35 U.S.C. 12 (b)(2)(B)(I). Applicant must attach form PTO/S or its equivalent.					
6 Application Data	Sheet. See 37 CFR 1.76	17		· · · · · · · · · · · · · · · · · · ·		
18. If a CONTINUING APPLI	CATION, check appropriate box, and	supply the re	quisite information b	pelow and in a j	prelimina	ry amendment,
or in an Application Data She		CIP)	of phorapplication No	,		
Prior application information:	Examiner		Group Art Unit:			
Box 5b, is considered a part of	ONAL APPS only: The entire disclosure the disclosure of the accompanying or relied upon when a portion has been in	intinuation or	divisional application	and is hereby in	ncorporal	s supplied under ted by reference.
	19. CORRESPO		······································			
Customer Number or Bar Co	odo Labo! (Wisort Eustoner No. or Att	nch ber code labe	or [X Correspon	dence eddr	ress below
Name		Z	he Li	·····		· · · · · · · · · · · · · · · · · · ·
		1 Ar	gent Drive			
Address			· · · · · · · · · · · · · · · · · · ·		- 1	
City	Poughkeepsie	State	New Yor	k Zip C	Code	12603
Country	USA	Telephone	845-298-83	342 Fe	ex 84	15-298-1889
Name (Print/Type)	Zhe Li	R	egistration No. (Att	orney/Agent)		
Signature	The Di	<u> </u>		Date	01/	13 / 2001

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Patent fees are subject to annual revision.

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Complete	e if Known
Application Number	
Filing Date	
First Named Inventor	Zhe Li
Examiner Name	
Group Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT	FEE CALCULATION (confinued)				
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to: Deposit	Large Small				
Account Number	Entity Entity Fee Fee Fee Fee Fee Description Fee Paid				
Deposit	Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)				
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Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status.	139 130 139 130 Non-English specification				
— See 3/ CFR 12/	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. X Payment Enclosed: X Check Credit card Money Cther	112 920* 112 920* Requesting publication of SIR prior to Examiner action				
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action				
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity	116 390 216 195 Extension for reply within second month				
Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month				
101 710 001 077	118 1,390 218 695 Extension for reply within fourth month				
101 710 201 365 Utility filing fee 355 106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month				
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal				
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal				
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing				
255	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 355	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES Fee from	141 1,240 241 620 Petition to revive - unintentional				
Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)				
Total Claims20** = X =	143 440 243 220 Design issue fee				
Claims L	144 600 244 300 Pfant issue fee				
Multiple Dependent	122 130 122 130 Petitions to the Commissioner				
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Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)				
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))				
104 270 204 135 Multiple dependent claim, if not paid	149 710 249 355 For each additional invention to be				
109 80 209 40 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$)	Other fee (specify)				
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				

SUBMITTED BY	TTED BY Complete (if applicable)			
Name (Print/Type)	Zhe Li	Registration No. (Attomey/Agent)	Telephone	845-298-8342
Signature	The li		Date	01 / 13 / 2001

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